

Continuing Education Funding Request Form

Continuing Education at the University of Utah inspires a love of learning through innovative, educational experiences for all ages and people. We strive to be a center of innovation, and we prize diversity, flexibility, and partnership.

We will consider making donations to organizations whose initiatives align with our own. In the form below, please explain how your activity relates to Continuing Education's mission, and how it can benefit our community.

If your organization receives funding, you will be required to submit a report of the activity that was funded, and a financial breakdown of how the funds were spent. This report will be due no later than 90 days after the activity's completion date.

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Continuing Education Funding Request Form

Today's Date:

Date of Activity:

Name and Address of Organization:

Representative's Name:

Work Telephone:

Email:

Purpose of this organization:

Does this agency have a nonprofit status? Yes No

Is this a religious organization or political party? Yes No

Check which applies: 501(c)(3)—nonprofit agency 509(a)(1)—government/school

Tax Exempt #:

Funding amount requested: \$

Project Name:

Describe how funding will be used:

Benefits to the community:

Thank you for your request. Please be advised that Continuing Education at the University of Utah cannot approve all requests. You will be contacted concerning approval or denial. If you have questions, please contact Betsy Oswald at (801) 585-1076 or boswald@aoce.utah.edu

For Continuing Education Use Only:

Approved Amount: _____ Denied: _____ Date Contacted: _____

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Continuing Education Activity Report Form

Today's Date:

Date of Activity:

Name and Address of Organization:

Representative's Name:

Work Telephone:

Email:

Project Name:

Amount Requested: \$

Amount Used: \$

If you have remaining funds, please describe how you will use them:

I. General Program Information

- A. Please describe the goals and objectives of your activity, and indicate the progress your organization has made toward those goals.

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B. Please discuss any factors that contributed to the success of your activity, or any impediments to success.

C. Please provide an anecdotal story about your project, describing a specific result. If your project dealt with individuals, please describe a typical participant both before and after the project.

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II. Budget

A. Provide a detailed list of all expenses incurred during this project which have been paid for with funding from Continuing Education. **NOTE: This should not include your organizational budget.**

ITEM	BUDGETED	ACTUAL
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____
UNEXPENDED BALANCE		\$ _____